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FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee Alaska Air		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2016	
Mailing Address PO Box 68900		Amount 250.00	
City Seattle	State WA	Zip Code 98168	Transaction ID : SE.6597 Date of Disbursement or Obligation MM / DD / YYYY 10 / 15 / 2016
Purpose of Expenditure Airfare for canvassing deployment 10/15-10/17		Category/ Type 002	
Name of Federal Candidate LEE, MIKE, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: UT
Calendar Year-To-Date Per Election for Office Sought 8500.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	

Full Name of Payee Alaska Air		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2016	
Mailing Address PO Box 68900		Amount 250.00	
City Seattle	State WA	Zip Code 98168	Transaction ID : SE.6599
Purpose of Expenditure Airfare for canvassing deployment 10/15-10/17	Category/ Type	002	Date of Disbursement or Obligation MM / DD / YYYY 10 / 15 / 2016
Name of Federal Candidate LOVE, MIA, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate	District: 04 State: UT
Calendar Year-To-Date Per Election for Office Sought	67776.80		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Date _____

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

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NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00530766 </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>		

Full Name of Payee Delta Airlines		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2016 </div>	
Mailing Address 1030 Delta Blvd.		Amount <div style="border: 1px solid black; padding: 2px; width: 100%;">1250.00</div>	
City Atlanta	State GA	Zip Code 30354	Transaction ID : SE.6602
Purpose of Expenditure Airfare for canvassing deployment 10/15-10/17	Category/ Type 002	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2016 </div>	
Name of Federal Candidate LEE, MIKE, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>UT</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; width: 100%;">9750.00</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

Full Name of Payee Delta Airlines		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2016 </div>	
Mailing Address 1030 Delta Blvd.		Amount <div style="border: 1px solid black; padding: 2px; width: 100%;">1250.00</div>	
City Atlanta	State GA	Zip Code 30354	Transaction ID : SE.6627
Purpose of Expenditure Airfare for canvassing deployment 10/15-10/17	Category/ Type 002	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2016 </div>	
Name of Federal Candidate LOVE, MIA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; width: 100%;">76026.80</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; width: 100%;">2500.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ►	<div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;"></div>
(c) TOTAL Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Buchanan, Emily, , ,

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Date

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 10 / 17 / 2016

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NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div>MM / DD / YYYY / / </div> <div>MM / DD / YYYY / / </div> <div>MM / DD / YYYY / / </div> </div>	

Full Name of Payee Enterprise Rent a Car			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2016		
Mailing Address 843 State St			Amount 2000.00		
City Salt Lake City	State UT	Zip Code 84111	Transaction ID : SE.6611		
Purpose of Expenditure Rental cars for canvassing deployment 10/15-10/17		Category/ Type 002	Date of Disbursement or Obligation MM / DD / YYYY 10 / 15 / 2016		
Name of Federal Candidate LEE, MIKE, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: UT		
Calendar Year-To-Date Per Election for Office Sought 16750.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		

Full Name of Payee Enterprise Rent a Car			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2016		
Mailing Address 843 State St			Amount 2000.00		
City Salt Lake City	State UT	Zip Code 84111	Transaction ID : SE.6613		
Purpose of Expenditure Rental cars for canvassing deployment 10/15-10/17		Category/ Type 002	Date of Disbursement or Obligation MM / DD / YYYY 10 / 15 / 2016		
Name of Federal Candidate LOVE, MIA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: UT		
Calendar Year-To-Date Per Election for Office Sought 74776.80			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	4000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ►	
(c) TOTAL Independent Expenditures..... ►	

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Buchanan, Emily, , ,

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NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div>MM / DD / YYYY / / </div> <div>MM / DD / YYYY / / </div> <div>MM / DD / YYYY / / </div> </div>	

Full Name of Payee Orbitz			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2016		
Mailing Address 500 W. Madison Street Suite 1000			Amount 1250.00		
City Chicago	State IL	Zip Code 60661	Transaction ID : SE.6592		
Purpose of Expenditure Airfare for canvassing deployment 10/15-10/17		Category/ Type 002	Date of Disbursement or Obligation MM / DD / YYYY 10 / 15 / 2016		
Name of Federal Candidate LEE, MIKE, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: UT		
Calendar Year-To-Date Per Election for Office Sought 8250.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee Orbitz			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2016		
Mailing Address 500 W. Madison Street Suite 1000			Amount 1250.00		
City Chicago	State IL	Zip Code 60661	Transaction ID : SE.6594		
Purpose of Expenditure Airfare for canvassing deployment 10/15-10/17		Category/ Type 002	Date of Disbursement or Obligation MM / DD / YYYY 10 / 15 / 2016		
Name of Federal Candidate LOVE, MIA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: UT		
Calendar Year-To-Date Per Election for Office Sought 67526.80			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2500.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Buchanan, Emily, , ,

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Priceline.com		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2016	
Mailing Address 800 Conneticut Ave		Amount 7000.00	
City Norwalk	State CT	Zip Code 06854	Transaction ID : SE.6587
Purpose of Expenditure Airfare for canvassing deployment 10/15-10/17		Category/Type 002	Date of Disbursement or Obligation MM / DD / YYYY 10 / 15 / 2016
Name of Federal Candidate LEE, MIKE, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: UT
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Priceline.com		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2016	
Mailing Address 800 Conneticut Ave		Amount 7000.00	
City Norwalk	State CT	Zip Code 06854	Transaction ID : SE.6589
Purpose of Expenditure Airfare for canvassing deployment 10/15-10/17		Category/Type 002	Date of Disbursement or Obligation MM / DD / YYYY 10 / 15 / 2016
Name of Federal Candidate LOVE, MIA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: UT
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	14000.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Buchanan, Emily, , ,

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NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Town Place Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2016	
Mailing Address 573 High Market Drive		Amount 5000.00	
City West Valley City	State UT	Zip Code 84120	Transaction ID : SE.6606
Purpose of Expenditure Lodging for canvassing deployment 10/15-10/17		Category/Type 002	Date of Disbursement or Obligation MM / DD / YYYY 10 / 15 / 2016
Name of Federal Candidate LEE, MIKE, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: UT
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Town Place Suites		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2016	
Mailing Address 573 High Market Drive		Amount 5000.00	
City West Valley City	State UT	Zip Code 84120	Transaction ID : SE.6608
Purpose of Expenditure Lodging for canvassing deployment 10/15-10/17		Category/Type 002	Date of Disbursement or Obligation MM / DD / YYYY 10 / 15 / 2016
Name of Federal Candidate LOVE, MIA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: UT
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	10000.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	33500.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Buchanan, Emily, , ,**[Electronically Filed]*

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